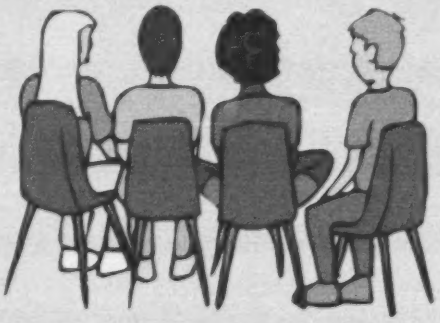
Prince Edward Island
CANADA

Children's Sexual Behaviours:

A Parent's Guide



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Purpose

This guide is intended to help parents and caregivers:

1. gain knowledge of children's sexual behaviours;
2. respond appropriately to a range of developmentally appropriate and inappropriate sexual behaviours;
3. determine if the child's behaviour appears to be normal curiosity or an indication that professional help should be sought.

Introduction

It is normal for children under the age of 12 to behave in sexual ways. In fact, according to William Friedrich of the Mayo clinic, sexual behaviour in children peaks between the ages of three and six.[1] However, some sexual behaviour in children may be an indication that there is something wrong – that the child has been sexually molested, has been exposed prematurely to adult sexual knowledge, or has begun to use sexual behaviour as a way to get emotional needs met, etc.

It is important to keep in mind that there are no absolutes. Normal, healthy behaviour covers a wide range and may not be expressed the same, or to the same extent, in every child. Similarly, problem behaviour covers a range from less to more severe, and may not mean the same thing in every child.

Normal and Expected Sexual Behaviours

Most children will engage in at least some sexual behaviour before the age of 12. For very young children (four or younger) such behaviours are more likely to be engaged in openly and come to the attention of adults.[2]

Around age six, children develop more of a sense of privacy, such that adults are less likely to be aware of their sexual behaviour. According to William Friedrich, it is likely that sexual interest and behaviour in children continue, but as children learn cultural standards these interests are concealed.[1]

A greater level of sexual interest may occur with the beginning of puberty, which ranges from age 10 to 15 for boys, and age eight to 14 for girls. The age at which puberty begins varies from child to child and is something that has changed over the past 40 to 50 years, with puberty starting six to 24 months earlier than it did for our grandparents and great-grandparents. [3,4]

Normal sexual behaviour in children is part of how they learn about and explore the world. In this sense, it is no different from the other things that show up in their play. According to Toni Cavanagh Johnson, Ph.D., an expert in the field of children's sexual development, natural and healthy sexual exploration during childhood is: "an information gathering process wherein children explore each other's bodies by looking and touching (e.g. playing doctor), as well as explore gender roles and behaviours (e.g. playing house)."[5]

A Guide to Sexual Behaviour of Children

The information in the charts below is a way to understand children's behaviours related to sex and sexuality by age group.[5] It is reprinted with written permission from the author, psychologist Toni Cavanagh Johnson, Ph.D.

The following charts identify sexual behaviours of children that are natural and healthy, sexual behaviours that are of concern, and sexual behaviours that require immediate consultation.

Dr. Cavanagh Johnson cautions that this guide cannot be used to determine whether or not a child has been sexually abused, and that when assessing the seriousness of a particular behaviour found within these charts, it is important to consider where the behaviour has taken place, how the behaviour was discovered, and the relationship between the children who were involved in the behaviour.

A range of sexual behaviours by age is described in each column of the following the following charts:

- ***Natural and Healthy*** – These behaviours are within the expected normal range for children of this age and developmental level. Children may engage in a few, several, or none of the behaviours.
- ***Of Concern*** – These behaviours are seen in children who are overly concerned about sex and sexuality for their age and developmental level. Consultation with a professional is recommended if a child demonstrates several of these behaviours, or if the behaviour persists in spite of interventions.
- ***Seek Professional Help*** – These behaviours require immediate consultation with a professional because they are indicative of a child who is experiencing confusion in the area of sexuality.

	Natural and Healthy	Of Concern	Seek Professional Help
Preschool Children (up to age five)	Touches/rubs own genitals when diapers are being changed, when going to sleep, when tense, excited or afraid or because it feels good.	Continues to touch/rub genitals in public after being told "no" consistently.	Touches/rubs self to the exclusion of normal childhood activities. Hurts own genitals by touching/ rubbing.
	Explores differences between males and females, boys and girls.	Asks continuous questions about genital differences after all questions have been answered.	Plays male or female roles in an angry, sad or aggressive manner. Hates own/other sex.
	Touches the "private parts" of familiar adults and children with hand or body.	Touches/rubs the "private parts" of familiar children or adults after they have been told consistently not to do so.	Sneakily touches/rubs the "private parts" of adults or children and, if questioned, deny it.
	Takes advantage of opportunity to look at nude people.	Stares at nude people even after having seen many people nude.	Asks people to take off their clothes. Tries to forcibly undress people.
	Asks about the genitals, breasts, intercourse, babies.	Keeps asking people even after parent has answered all questions at an age appropriate level.	Asks unfamiliar people after parent has answered all questions. Sexual knowledge too great for age.
	Erections.	Very frequent erections.	Fearful of erections.
	Likes to be nude. May show others his/her genitals.	Wants to be nude in public after the parent repeatedly and consistently says "no."	Refuses to put on clothes. Secretly shows "private parts" in public after many scoldings.
	Interested in watching people doing bathroom functions.	Interest in watching bathroom functions does not wane after days/weeks.	Refuses to leave people alone in bathroom. Forces way into bathroom.
	Interested in having/birthing a baby.	Boys' interest does not wane after several days/weeks of play about babies.	Displays fear or anger about babies, birthing or intercourse.
	Child stands/sits too close to familiar adults and children.	Child stands/sits too close to unfamiliar adults and children.	After consistent reminders by the adults, the child stands/sits with his/her body touching familiar/ unfamiliar adults, which makes the adults uncomfortable.
	Uses dirty words for bathroom and sexual functions.	Continues to use "dirty" words at home after parent consistently says "no," and parents do not swear.	Uses "dirty" words in public and at home after many strong scoldings and parents do not swear.
	Interested in own feces.	Smears feces on walls or floor more than one time.	Repeatedly plays or smears feces after scolding. Angry when doing it.
	Plays "doctor" inspecting others' bodies, including "private parts."	Frequently plays "doctor" and gets caught, after being told "no" consistently.	Forces child to take off clothes and play "doctor."
	Puts something in own genitals or rectum one time for curiosity or exploration.	Puts/tries to put something in genitals or rectum of self or other after being told "no."	Any coercion, force, pain in putting/trying to put something in genitals or rectum of self or other person.
	Plays house, acts out roles of mommy and daddy.	Humping other children with clothes on after being told not to.	Simulated or real intercourse without clothes; oral genital contact.

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	Normal Range	Of Concern	Seek Professional Help
Kindergarten Through Fourth Grade Children	Asks about the genitals, breast, intercourse, babies.	Shows fear or anxiety about sexual topics.	Asks endless questions about sex after curiosity satisfied. Sexual knowledge/vocabulary/ thoughts too advanced for age.
	Interested in watching/peeking at people doing bathroom functions.	Keeps getting caught watching/peeking at others doing bathroom functions.	Refuses to leave people alone in bathroom.
	Uses "dirty" words for bathroom functions, genitals, and sexual behaviour.	Uses "dirty" words with adults after parents consistently says "no" and punishes the child.	Continues use of "dirty" language even after exclusion from school and favorite activities and parents/relatives do not use these words.
	Plays "doctor." The child inspects another child's body, including "private parts."	Frequently plays "doctor" and gets caught after being told not to do so.	Forces child to take clothes off and touches/inserts something in child's "privates."
	Boys and girls are interested in having/birthing a baby.	Boy keeps making believe he is having a baby after month/s.	Child displays fear or anger about babies or intercourse.
	Touches/rubs own genitals when going to sleep, when tense, excited, afraid or because it feels good. Shows others his/her genitals in a private location.	Shows genitals in public. Continues to touch/rub genitals in public after being told "no" consistently. Rubs genitals on furniture or other objects after the parent says "no" and punishes child.	Shows genitals at school and/or other places to express anger or disdain for authority.
	Plays house, may simulate all roles of mommy and daddy.	Repeatedly humping other children with clothes on. Repeatedly imitates sexual behaviour with dolls/stuffed toy.	Humping others while naked. Intercourse with another child. Forcing sexual contact on a child or adult.
	Thinks other gender children are "gross" or have "cooties." Chases them.	Continues to use "dirty" language after other children really complain.	Uses bad language against other child's family. Makes sexual threats.
	Talks about sex with friends. Talks about having a girl/boy friend.	Sex talk gets child in trouble. Romanticizes all relationships. Sexualizes all relationships.	Talks about sex and sexual acts habitually. Repeatedly in trouble with regard to sexual talk.
	Wants privacy when in bathroom or changing clothes.	Becomes very upset when observed changing clothes, using toilet or bathing.	Aggressive or fearful in demand for privacy.
	Likes to hear and tell "dirty" jokes, makes a few sexual sounds.	Keeps getting caught telling "dirty" jokes or making sexual sounds, e.g., sighs, moans.	Still gets caught telling "dirty" jokes, or making sexual sounds, even after exclusion from school and fun activities.
	Plays games with same-aged children related to sex and sexuality.	Wants to play games related to sex and sexuality with much younger, older or unknown children.	Child/children force others to play sexual games that make them uncomfortable.

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	Normal Range	Of Concern	Seek Professional Help
Kindergarten Through Fourth Grade Children	Draws genitals on human figures for artistic expression or because figure is being portrayed in the nude.	Draws genitals on some nude figures but not others or on drawings of clothed people. Genitals disproportionate to size of body.	Genitals stand out as most prominent feature of drawing. Drawings of intercourse, group sex, sex with animals, sadism, masochism, etc.
	Explores differences between adult males and females, boys and girls.	Confused about male/female differences after all questions have been answered.	Plays male or female roles in a sad, angry or aggressive manner exclusively.
	Takes advantage of opportunity to look at nude people.	Stares/sneaks to stare at nude people after punishment and having seen many people nude.	Asks others to take off their clothes. Tries to forcibly undress children or adults.
	Pretends to be opposite gender.	Talks very negatively about own gender.	Hates/fears being own gender. Hates own genitals.
	Wants to compare genitals with peer-aged friends.	Wants to compare genitals with much older or much younger people.	Demands to see the genitals, breasts, or buttocks of others.
	Looks at the genitals, buttocks, or breasts of others.	Stares at the genitals, breasts, or buttocks of others making them uncomfortable.	Continuously sneaks and peeks at genitals, breast, or buttocks of others after being caught many times.
	Interest in touching genitals, breast, or buttocks of other same-age child or have child touch his/hers.	Makes others uncomfortable by requests to touch their genitals, breasts, or buttocks or have them touch his/her genitals, breast, or buttocks.	Coerces unwilling child to touch his or her genitals, breasts, or buttocks or allow touching of theirs. Forced or mutual oral, anal, or vaginal sex.
	Kisses/hugs familiar adults and children. Allows kisses/hugs by familiar adults and children.	French kissing. Talks/acts in a sexualized manner with unknown children. Fearful of hugs and hisses by adults. Gets very anxious when sees displays of affection. Kisses/ hugs unfamiliar adult or child.	Talks/acts in a highly sexualized manner with known or unknown adults/ children, which makes them feel uncomfortable. Physical contact with any adult causes agitation, anger, fear or anxiety to the child or adult.
	Looks at nude pictures on the Internet, videos, magazines, etc.	Continuous fascination with nude pictures that gets child in trouble.	Wants to masturbate to nude pictures or display them.
	Erections.	Continuous erections or fear of erections.	Painful erections or hurting self to stop erection.
	Puts something in own genitals/rectum for the physical sensation, curiosity or exploration.	Puts something in own genitals/rectum frequently or when it feels uncomfortable. Puts something in the genitals/rectum of other child.	Any coercion or force in putting/ trying to put something in genitals/rectum of other child. Causes harm to own/others genitals/rectum.
	Interest in breeding behaviour of animals.	Touching genitals of animals.	Sexual behaviours with animals.

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Responding to Children's Sexual Behaviour

Parents and caregivers may feel uncomfortable if they discover their child engaging in sexual behaviour but it is important not to overreact, shame, embarrass, or discipline the child. A parent or caregiver's reaction to a child's sexual behaviour is important for the child's well-being.

The Child Sexual Abuse Committee of the National Child Traumatic Stress Network and The Children's Assessment Center recommend that when responding to sexualized behaviour or sexualized play between children:[2,6]

- **Try to figure out what happened.** To do this, it is important to stay calm. Staying calm will allow you to make clear decisions about what you say and/or do, rather than acting on strong emotions.
- **Do not overreact.** By staying calm and handling the situation without overreacting, children will develop a positive sense of self and sexuality.
- **Remain composed.** Try taking a long, deep breath, counting to ten, or even stepping away from the situation for a few minutes before saying anything. After taking a few moments to collect your thoughts, and to consult with a spouse or partner if feeling unsettled, you may then wish to speak to your child.
- **Ask questions.** When talking to children about sexual behaviours, it is important to maintain a calm and even tone of voice and to ask open-ended questions as much as possible. This allows for a child to tell what happened in their own words, rather than just answering yes or no. A parent might ask the child: what were you doing?, how did you get the idea?, how did you learn about this?, how did you feel about doing it?.
- **Stop the behaviour.** If children are masturbating in public or in front of others, explain to them that it is not appropriate to touch their private parts in public and that if they feel they need to touch their private parts they need to do it in private, hence "private parts." Children should not be told that it is "bad," "dirty," or "nasty" when found masturbating and they should not be punished. When children are exploring their sexuality with other children, parents should explain to them that when they are playing with their friends they need to leave their clothes on and that it is not okay to touch or show private parts. Parents should also ask the children if they have any questions and be available to answer any that they ask.
- **Don't punish.** Don't yell at or punish them. Punishing such behaviours can lead to sexual inhibitions later on and hinder a child's sexual development. Tell children that their behaviour is not appropriate by being clear and direct without making them feel guilty.
- **Redirect the behaviour.** Redirect the child's behaviour into a more acceptable play activity. Introduce a new game or other activities to distract their behaviour.

- **Educate the child.** If you encounter a situation where the child is embarrassed but otherwise not distressed, use it as an opportunity for teaching the child about healthy boundaries and rules about sexual behaviour.

- **Do not ignore.** Just because a behaviour is typical doesn't mean the behaviour should be ignored. When children participate in sexual behaviour it often indicates that they need to learn something. Teach what the child needs to know. For example, a parent may teach a child that it's okay to be curious about other people's bodies but that private parts should be kept private, even with friends.

If you experience a concerning situation, do not be embarrassed or afraid to seek professional help. If you have any questions about sexuality in children, or if you are concerned that a child's sexual behaviour has gone beyond what is considered natural and healthy, you can get help and advice by calling the following numbers:

Provincial Contacts for Help and Advice

Provincial Resource for Consultation
Lindy Affleck
Sexual Deviance Assessment and Treatment Clinician
Community and Correctional Services
Dept. of Environment, Labour, and Justice
Telephone (902) 368-6391

Community Mental Health Children's Centralized Intake
1-866-833-5443 (toll free)
368-4427 (Charlottetown)

Provincial Child Protection Services
During regular business hours
368-6657
1-877-341-3101 (toll free)

After hours, holidays and weekends
368-6868
1-800-341-6868 (toll free)

To report an incident of child sexual abuse, contact Child Protection Services at the numbers above or call 911

Note: The original version of this guide was developed in 2001 by Randall Fletcher, Prince Edward Island Sexual Deviance Specialist, and reprinted in 2005. This 2013 edition of the guide is an updated and expanded version of the original resource for parents and others wanting information on children's sexual development.

References

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[3] Herman-Giddens, M. E., et al. (2012). Secondary Sexual Characteristics in Boys: Data From the Pediatric Research in Office Settings Network. Pediatrics, e1058-e1068. Doi:10.1542/peds. 2011-3291.

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[5] Johnson, T. C. (2013). Understanding children's sexual behaviours: What's natural and healthy. *www.tcavjohn.com*

[6] The Children's Assessment Center. (undated). Children's sexual behaviour and body safety: A guide for parents. Grand Rapids, MI. Retrieved November 26, 2012 from http://www.cac-kent.org/questionsandanswers.php